

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	05-28-99
FORMALITY REVIEW	XJ		7/26/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	10	2-20-93
2	✓	11	4-23-02
3	✓	12	4-24-02
4	✓	13	11-14-03
5	✓	14	
6	✓	15	
7	✓	16	
8	✓	17	
9	✓	18	
10	✓	19	
11	✓	20	
12	✓	21	
13	✓	22	
14	✓	23	
15	✓	24	
16	✓	25	
17	✓	26	
18	✓	27	
19	✓	28	
20	✓	29	
21	✓	30	
22	✓	31	
23	✓	32	
24	✓	33	
25	✓	34	
26	✓	35	
27	✓	36	
28	✓	37	
29	✓	38	
30	✓	39	
31	✓	40	
32	✓	41	
33	✓	42	
34	✓	43	
35	✓	44	
36	✓	45	
37	✓	46	
38	✓	47	
39	✓	48	
40	✓	49	
41	✓	50	

Claim	Final	Original	Date
51	✓	11-14-03	
52	✓		
53	✓		
54	✓		
55	✓		
56	✓		
57	✓		
58	✓		
59	✓		
60	✓		
61	✓		
62	✓		
63	✓		
64	✓		
65	✓		
66	✓		
67	✓		
68	✓		
69	✓		
70	✓		
71	✓		
72	✓		
73	✓		
74	✓		
75	✓		
76	✓		
77	✓		
78	✓		
79	✓		
80	✓		
81	✓		
82	✓		
83	✓		
84	✓		
85	✓		
86	✓		
87	✓		
88	✓		
89	✓		
90	✓		
91	✓		
92	✓		
93	✓		
94	✓		
95	✓		
96	✓		
97	✓		
98	✓		
99	✓		
100	✓		

Claim	Final	Original	Date
101	✓	11-14-03	
102	✓		
103	✓		
104	✓		
105	✓		
106	✓		
107	✓		
108	✓		
109	✓		
110	✓		
111	✓		
112	✓		
113	✓		
114	✓		
115	✓		
116	✓		
117	✓		
118	✓		
119	✓		
120	✓		
121	✓		
122	✓		
123	✓		
124	✓		
125	✓		
126	✓		
127	✓		
128	✓		
129	✓		
130	✓		
131	✓		
132	✓		
133	✓		
134	✓		
135	✓		
136	✓		
137	✓		
138	✓		
139	✓		
140	✓		
141	✓		
142	✓		
143	✓		
144	✓		
145	✓		
146	✓		
147	✓		
148	✓		
149	✓		
150	✓		

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here